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12 COSTCO WHOLESALE CORP. and
13 NBTY, INC.

14 UNITED STATES DISTRICT COURT
15 SOUTHERN DISTRICT OF CALIFORNIA
16

17 TATIANA KOROLSHTEYN, on behalf
18 of herself and all others similarly
19 situated,

20 Plaintiff,

21 v.

22 COSTCO WHOLESALE
23 CORPORATION, and NBTY, INC.

24 Defendants.
25
26
27
28

CASE NO.: 3:15-CV-00709-CAB-RBB

**DEFENDANTS' OPPOSITION TO
PLAINTIFF'S MOTION TO
EXCLUDE EVIDENCE, OPINIONS,
AND TESTIMONY OF
DEFENDANTS' EXPERT SUSAN
MITMESSER**

Date: TBD

Time: TBD

Judge: Hon. Cathy Ann Bencivengo

Courtroom: 4C

**PER CHAMBERS RULES, NO
ORAL ARGUMENT UNLESS
SEPARATELY ORDERED BY THE
COURT**

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MEMORANDUM OF POINTS AND AUTHORITIES

I. INTRODUCTION

Plaintiff's Motion is fatally flawed at its core because it is based on the incorrect legal standard. Plaintiff undeniably bears the burden of proof in this case. She must prove not only that the advertised health benefits of Defendants' Trunature Gingko Biloba with Vinpocetine product (the "Product") are false, but that they are universally false – i.e., the Product provides no benefits to *anyone*, whether sick or healthy. That is the basis upon which she persuaded the Court to certify a class comprising of "all consumers."

Nevertheless, Plaintiff's Motion to exclude the opinions of Dr. Susan Mitmesser ("Mot.") contravenes these fundamental principles by using the wrong legal standard. Operating on the fallacious premise that Defendants bear the burden of substantiating the Product's claims, Plaintiff seeks to exclude Dr. Mitmesser's relevant and reliable opinions essentially because they do not help prove up Plaintiff's case.

For example, Plaintiff faults Dr. Mitmesser for "cherry-picking" only those studies which support the Product's claims. According to Plaintiff, she did not conduct a "totality of the evidence analysis" – i.e., include the studies cited by Plaintiff in her favor – to establish that "Defendants' claims about [the Product] were proven and thus truthful." Mot. at 5, 6. However, this is contrary to the controlling legal standard in a false advertising action. In an action such as this one, the **plaintiff** alone bears the burden of proving **falsity**, and the defendant has no obligation to prove anything, much less substantiate its label claims. Thus, as a matter of law, Dr. Mitmesser is not required to account for the studies upon which Plaintiff relies.

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1 Plaintiff also criticizes Dr. Mitmesser for relying on studies conducted upon
 2 diseased subjects,¹ the results of which Plaintiff claims cannot be reliably
 3 extrapolated to healthy individuals. But this critique misses the point. Even
 4 setting aside whether the testing data can be extrapolated, the fact of the matter is
 5 that Plaintiff has the burden of proving that the Product does not work for *any*
 6 member of the certified “all consumers” class, whether healthy or sick. As the
 7 Court noted in its Order Granting Plaintiff’s Motion for Class Certification
 8 (“Order”), “Plaintiff’s entire lawsuit rides on her claim that TruNature Ginkgo
 9 provides *no* benefits and that the statements on the product labels are false. *The*
 10 *answer to these questions will be the same for the entire class.*” (Dkt. No. 158 at
 11 10) (emphasis added). Accordingly, if Plaintiff cannot overcome the studies
 12 referenced by Dr. Mitmesser showing that the Product benefits the diseased
 13 population and affirmatively prove that the Product is ineffectual for that group,
 14 then Plaintiff’s entire case falls apart. Therefore, the diseased population studies
 15 upon which Dr. Mitmesser relies are not just relevant—they are dispositive.

16 Lastly, the Motion also should not be granted on any of the remaining
 17 grounds that Plaintiff avers. Those objections, pertaining to issues such as testing
 18 methodology and Dr. Mitmesser’s qualifications, largely bear on the weight of her
 19 opinions, not their admissibility. Moreover, some of the objections are baseless on
 20 their face, as they are hatched out of mischaracterizations of Dr. Mitmesser’s
 21 deposition testimony and the studies she relies upon.

22 For the foregoing reasons and others referenced below, Plaintiff’s Motion
 23 should be denied in its entirety.
 24

25
 26 ¹ The reference to a “diseased” population may be overbroad to the extent it
 27 includes populations who are merely suffering from cognitive decline or mild
 28 cognitive impairment, a condition which may or may not be classified as a
 disease.

1 **II. ARGUMENT**

2 **A. Dr. Mitmesser's Opinions are Relevant to the Issues in This**
 3 **Falsity Case**

4 **1. *Plaintiff misapprehends the relevant standard in a falsity case.***

5 As explained more fully in Defendants' recently filed Motion for Summary
 6 Judgment (Dkt. No. 172), there are material differences between the legal standard
 7 that governs lack of substantiation versus falsity cases – differences which are
 8 critical to the Court's decision on the instant Motion. Specifically, challenges
 9 based on a lack of substantiation are not available to private plaintiffs under
 10 California law; such actions are "left to the Attorney General and other prosecuting
 11 authorities . . ." *Nat'l Council Against Health Fraud v. King Bio Pharm., Inc.*, 107
 12 Cal. App. 4th 1336, 1344–45 (2003). In lack of substantiation actions, the burden
 13 rests upon the defendant to come forward with evidence justifying its advertising
 14 claims. *Id.* at 1345 (prosecutor can "require advertiser to substantiate advertising
 15 claims"). And, in doing so, the defendant may be required to satisfy the "totality
 16 of the evidence" standard that is promulgated by the Federal Food and Drug
 17 Administration ("FDA").²

18 The burden is different in a falsity case brought by a private plaintiff,
 19 however. In a case like this one, "Plaintiff [must] adduce evidence sufficient to
 20 _____

21 ² In the FDA's Guidance for Industry: Substantiation for Dietary Supplement
 22 Claims Made Under Section 403(r)(6) of the Federal Food, Drug, and Cosmetic
 23 Act ("FDA's Substantiation Guidance"), the FDA recommends looking at four
 24 issues "[i]n determining whether the *substantiation standard* has been met with
 25 competent and reliable scientific evidence." FDA, *Guidance for Industry:*
 26 *Substantiation for Dietary Supplement Claims Made Under Section 403(r)(6) of*
 27 *the Federal Food, Drug, and Cosmetic Act*, at II.A (2008) ("FDA Guidance")
 28 (emphasis added), <https://www.fda.gov/Food/GuidanceRegulation/GuidanceDocumentsRegulatoryInformation/ucm073200.htm>. The "totality of the evidence" is one of these four issues to be evaluated under the *substantiation* standard – which clearly does not govern this case. *Id.*

1 present to a jury to show that Defendant’s advertising claims with respect to [the]
 2 Product are actually false; not simply that they are not backed up by scientific
 3 evidence.” *Fraker v. Bayer Corp.*, 2009 WL 5865687, at *8 (E.D. Cal. Oct. 6,
 4 2009). To establish falsity, Plaintiff must show “that ***all scientists agree***” the
 5 product at issue fails to provide the advertised benefits. *In re GNC Corp.*, 789 F.3d
 6 505, 515 (4th Cir. 2015) (emphasis added).³

7 On the other hand, the defendant in a falsity case has **no** burden to produce
 8 any evidence or substantiate the truth of its products’ claims. *King Bio*, 107 Cal.
 9 App. 4th at 1345 (“private plaintiffs are not authorized to demand substantiation for
 10 advertising claims”). Moreover, the plaintiff cannot satisfy its burden of proving
 11 claims are false by taking issue with a defendant’s support for those claims – to
 12 allow that is to “improperly shift[] the burden of substantiation to Defendants.”
 13 *Reed v. NBTY, Inc.*, 2014 WL 12284044, at *14 (C.D. Cal. Nov. 18, 2014).
 14 Rather, “[w]here there are studies demonstrating both the effectiveness and
 15 ineffectiveness of the Products,” then, as a matter of law, “a reasonable jury could
 16 not find that the advertising claims are false.” *Id.* at *15.

17 For these reasons, Plaintiff alone bears the burden of proving that the
 18 advertised health benefits of Defendants’ Product are actually false. Defendants
 19
 20
 21

22 ³ Even if this Court were to reject the “all scientists agree” standard from *In re*
 23 *GNC* and adopt the *Mullins v. Premier Nutrition Corp.*, 178 F. Supp. 3d 867,
 24 894-95 (N.D. Cal. Apr. 15, 2016) standard that plaintiff must show “all
 25 scientists agree” to prove literal falsity or, alternatively, that the “vast majority
 26 of scientists agree” to prove something is literally true but nevertheless
 27 misleading—a case this Court should not follow because it represents a
 28 departure from established case law—the opinions of Defendants’ experts and
 the studies they cite would still be admissible to show that Plaintiff cannot meet
 that standard either.

1 have no burden to prove anything, much less to scientifically substantiate their
2 claims.⁴

3 **2.** *Dr. Mitmesser did not have to conduct a “totality of the*
4 *evidence” analysis; she merely had to show there are studies in*
5 *favor of ginkgo’s efficacy.*

6 Plaintiff’s primary rationale for excluding Dr. Mitmesser’s opinions is that
7 they purportedly do not adequately substantiate Defendants’ claims. Specifically,
8 Plaintiff complains Dr. Mitmesser selectively cites only studies which provide
9 “proof” of the Products’ claims, rather than considering the “totality of evidence” –
10 referring specifically to the studies identified by Plaintiff’s experts which suggest
11 that the Product is ineffective. Mot. at 5. As a result of this deficiency, Plaintiff
12 contends, Dr. Mitmesser’s opinions cannot reliably answer the question of
13 “whether Defendants’ claims about [the Product] were proven and thus truthful.”
14 *Id.* at 6.

15 This argument in favor of exclusion fails because, quite simply, Dr.
16 Mitmesser did not have to conduct a “totality of the evidence” analysis *for this*
17 *case*. The “totality of the evidence” analysis is relevant to a *substantiation* claim,
18 not a falsity claim. For example, the FDA Guidance, which references the “totality
19 of the evidence” standard, states that it is “intended to describe the amount, type,
20 and quality of evidence FDA recommends a manufacturer have to *substantiate* a
21 claim.” FDA Guidance, I.A. (emphasis added). It is thus evident that the FDA
22 Guidance applies to lack of substantiation claims only, not falsity claims.

23 In this case, as noted above, Plaintiff has the burden to show that “all
24 reasonable scientists” agree that ginkgo does not work. On the other hand, for
25

26 ⁴ Nothing herein should be construed as an admission by Defendants that their
27 claims are *not* substantiated. Defendants are merely noting that they need not
28 prove as much in this case.

Defendants to prevail, they need only show that is **not** the case (i.e., that such universal agreement does not exist). Indeed, it is well-established that “[w]here there are studies demonstrating both the effectiveness and ineffectiveness of the Products,” then, as a matter of law, “a reasonable jury could not find that the advertising claims are false. *Reed*, 2014 WL 12284044, at *15.

Ultimately, then, Dr. Mitmesser’s opinions may not be excluded for purportedly failing to conduct a “totality of the evidence” test that is not required. Rather, as a matter of law, Dr. Mitmesser is permitted to opine that there are studies showing that ginkgo is efficacious, because such testimony is relevant to establishing that there are studies demonstrating the effectiveness of ginkgo so that a “reasonable jury could not find the advertising claims are false.” *Reed*, 2014 WL 12284044, at *15. *See also Primiano v. Cook*, 598 F.3d 558, 567 (9th Cir. 2010), *as amended* (Apr. 27, 2010) (“The ‘will assist’ requirement, under *Daubert*, ‘goes primarily to relevance.’ What is relevant depends on what must be proved . . .”).⁵

B. The Studies Conducted on Diseased Subjects Upon Which Dr. Mitmesser Relies Are Relevant.

Plaintiff asserts that Dr. Mitmesser improperly relies on studies conducted upon diseased subjects, because their results are not relevant and cannot be reliably extrapolated to healthy individuals. Mot. at 6, 12-13. However, regardless of whether the results can be extrapolated,⁶ the Product’s demonstrated efficacy amongst the diseased population nevertheless addresses an entirely relevant – if not

⁵ Ironically, Plaintiff’s concession in her motion that Dr. Mitmesser relies on studies showing that ginkgo works, Mot. at 2: is, in itself, a basis to grant Defendants’ Motion for Summary Judgment. Having explicitly conceded there are studies in favor of ginkgo’s efficacy, Plaintiff has effectively conceded they cannot establish falsity.

⁶ This issue is discussed below at section II.D.3, *infra*.

1 dispositive – issue in this case.

2 Plaintiff chose to seek certification of a class comprised of “all consumers” –
3 inclusive of both the healthy and cognitively impaired. Accordingly, as the Court
4 observed, “Plaintiff’s entire lawsuit rides on her claim that TruNature Gingko
5 provides *no* benefits and that the statements on the product labels are false. *The*
6 *answer to these questions will be the same for the entire class.*” Order at 10
7 (emphasis added).

8 Therefore, if Plaintiff cannot overcome the positive findings in the diseased
9 subject studies and affirmatively prove that the Product is, in fact, ineffective for
10 that population, then Plaintiff’s entire case is doomed. *Rikos v. Procter & Gamble*
11 *Co.*, 799 F.3d 497, 520 (6th Cir. 2015), *cert. denied*, 136 S. Ct. 1493, 194 L. Ed. 2d
12 597 (2016) (“In other words, assessing this evidence will generate a common
13 answer for the class based on Plaintiffs’ theory of liability—whether Align in fact
14 has been proven scientifically to provide digestive health benefits for anyone.
15 **That common answer, of course, may be that Align does work for some**
16 **subsets of the class.** That does not transform this classwide evidence into
17 individualized evidence that precludes class certification, however Rather, the
18 **more straightforward impact of this evidence is simply that it may prevent**
19 **Plaintiffs from succeeding on the merits.**”) (emphasis added). Dr. Mitmesser’s
20 references to the tests conducted upon the diseased subjects are thus indisputably
21 material to this case.⁷

22
23 ⁷ Plaintiff tries to avoid this conclusion by claiming Dr. Mitmesser “admitted” at
24 deposition that “Defendant’s [product] is not marketed to treat Alzheimer’s or
25 dementia and is intended for persons with healthy cognitive function or mild
26 memory problems due to aging.” Mot. at 6-7. This mischaracterizes her
27 testimony. Read in context, her statement merely confirms the fact that the
28 Product label does not target *any* specific population to the exclusion of
another. See Delgado Decl. Ex. 1, Mitmesser 3/28/17 Deposition Transcript
 (“Mitmesser Depo. II”) at 8:17-9:8 (when asked whether the label indicates that

1 **C. Dr. Mitmesser is Well-Qualified to Opine on the Cognitive**
 2 **Benefits of the Product, and Challenges to Her Qualifications and**
 3 **Credibility Go to the Weight, not Admissibility, of Her Opinions.**

4 **1. Dr. Mitmesser’s qualifications are more than sufficient for this**
 5 **case.**

6 It is axiomatic that “[t]he qualifications for expert witnesses under Rule 702
 7 should be construed broadly.” *Obesity Research Inst., LLC v. Fiber Research Int’l,*
 8 *LLC*, 2017 WL 1166307, at *2 (S.D. Cal. Mar. 29, 2017); *see also People v.*
 9 *Kinder Morgan Energy Partners, L.P.*, 159 F. Supp. 3d 1182, 1190 (S.D. Cal.
 10 2016) (Rule 702 “contemplates a broad conception of expert qualifications”). As
 11 such, “arguments regarding expert’s qualifications go more towards weight than
 12 admissibility because jurors can determine who is ‘best’ qualified.” *In re Silicone*
 13 *Gel Breasts Implants Prods. Liab. Litig.*, 318 F. Supp. 2d 879, 889 (C.D. Cal.
 14 2004).

15 Consistent with this principle, an expert who is qualified in the field
 16 generally is permitted to testify on a specific subject within that field, even if she
 17 lacks specialized training or experience in that particular topic. *See Obesity*
 18 *Research*, 2017 WL 1166307 at *2 (“It is an abuse of discretion for a court to
 19 disqualify an expert witness that is generally qualified” and what “Dr. Lerner lacks
 20 [in] the specialization of working with human subjects . . . would affect the weight
 21 of testimony rather than the admissibility”); *Lucido v. Nestle Purina Petcare Co.*,

22
 23
 24 the Product is intended for a particular population – i.e., healthy persons, sick
 25 persons, or persons with Alzheimer’s – Dr. Mitmesser answered accurately,
 26 “That’s not indicated”). And it certainly does not establish that diseased or
 27 otherwise impaired individuals did not or could not purchase the Product.
 28 Moreover, at no time during the briefings on class certification did Plaintiff
 maintain – nor could she maintain – that her now-certified “all consumers”
 class is comprised exclusively of healthy persons.

1 -- F. Supp. 3d --, 2016 WL 6804576, at *8 (N.D. Cal. November 17, 2016) (citing
 2 4–702 Weinstein's Fed. Evid. § 702.04[1][a] (stating that “it is an abuse of
 3 discretion for a trial court to exclude expert testimony solely on the ground that the
 4 witness is not qualified to render an opinion because the witness lacks expertise in
 5 specialized areas that are directly pertinent to the issues in question, if the witness
 6 has educational and experiential qualifications in a general field related to the
 7 subject matter of the issue in question”)); *United States v. Boyajian*, 2013 WL
 8 4189649, at *13 (C.D. Cal.
 9 Aug. 14, 2013) (lack of specialization “affects the weight of the expert's testimony,
 10 not its admissibility”).

11 In this case, Dr. Mitmesser holds a Ph.D. in human nutrition. Since 2012,
 12 she has served as Director, Nutrition Research, and as Senior Director, Nutrition &
 13 Scientific Affairs, for Defendant NBTY, Inc. Prior to that, she was employed for
 14 seven years by Mead Johnson Nutrition as both Manager, Medical
 15 Communications and Manager, Global Medical Communications. In her corporate
 16 positions, Dr. Mitmesser’s duties included management of nutrition research
 17 activities, as well as oversight of protocol and clinical study report development.
 18 She has authored or co-authored 19 peer-reviewed scientific articles in her field.
 19 She is also currently an Adjunct Professor at the Gerald J. and Dorothy R.
 20 Friedman School of Nutrition Science and Policy at Tufts University. Mitmesser
 21 Expert Report at Sec. I. & Ex. A thereto (Dkt. No. 185-2).

22 Further, Dr. Mitmesser has testified in four court cases other than the instant
 23 one. *Id.* at Sec. IV. In one recent matter, *Reed v. NBTY, Inc.*, 2014 WL 12284044,
 24 in the Central District of California, her expert opinion on behalf of NBTY, Inc.
 25 was accepted and considered by the Court in connection with its grant of summary
 26 judgment in defendant NBTY’s favor. There, the plaintiff challenged the
 27 physiological health effect claims of a nutritional supplement; one of the claims at
 28

1 issue was the increase in vasodilation and blood flow. *Reed*, 2014 WL 12284044,
2 at *1.

3 Plaintiff challenges Dr. Mitmesser's qualifications on the grounds that she
4 has no "experience, training or education concerning the science related to brain
5 function." Motion at 1. Putting aside for the moment that such specialized
6 experience would not be required, this argument is simply inaccurate. At her
7 deposition, Dr. Mitmesser stated that, "[t]hroughout my professional career . . .
8 I've been involved in looking at . . . the brain [and] memory . . . and how we
9 clinically can measure, things of that nature." Delgado Decl. Ex. 1, Mitmesser
10 Depo. II Tr. 16:24-17:17. She then described the following representative training
11 and experience in brain function and brain function analysis that she has had:

- 12 • Took post-graduate coursework regarding the treatment of Alzheimer's
13 disease and dementia. *Id.*, 15:5-16:15.
- 14 • Researched, wrote and interpreted clinical trials regarding the effects of
15 cigarettes on memory and cognition function. *Id.*, 19:15-20:19.
- 16 • At Mead Johnson, involved in research on the effect of formulas and pre-
17 natal nutrients on cognitive brain development, brain maturation, and
18 visual acuity in fetuses, infants, and young children. *Id.*, 20:20-22:24.
- 19 • Prior to this litigation, involved in studies on behalf of NBTY about
20 blood flow to the brain, and the effects of different ingredients and
21 nutrients on brain function. *Id.*, 23:9-15.

22 **2. *Dr. Mitmesser's experience and training relating to ginkgo***
23 ***prior to this litigation***

24 In an attempt to discredit her, Plaintiff claims that Dr. Mitmesser's "opinions
25 concerning ginkgo were developed solely for this litigation," and that "[t]he first
26 time" she read a study on ginkgo was at the end of 2015, a year after the instant
27 lawsuit was filed. Motion at 1, 17. This accusation is both unavailing and false.

28 First, Dr. Mitmesser's supposed lack of experience or training with regard to

1 ginkgo specifically goes to the weight and not the admissibility of her opinions.
 2 As demonstrated above, she has sufficient training and experience on the study of
 3 brain functions and how they are impacted by nutrients and ingredients generally.
 4 Case law makes clear that an expert with general qualifications in the field is
 5 sufficiently qualified to testify about a specific subject therein, even without
 6 specialized training on that particular matter. *See Boyajian*, 2013 WL 4189649, at
 7 *13 (lack of specialization “affects the weight of the expert’s testimony, not its
 8 admissibility”); *United States v. Bilson*, 648 F.2d 1238, 1239 (9th Cir. 1981) (“The
 9 absence of a specialty degree in psychology did not disqualify the psychiatrist from
 10 expressing an opinion”).

11 Second, Plaintiff is espousing fake facts. While Dr. Mitmesser did state
 12 during her deposition that she had looked at the ginkgo studies cited in her report
 13 in late 2015 (after the lawsuit was filed), the entirety of her testimony makes clear
 14 that was not the first time she looked at them, as Plaintiff’s contends. Rather, Dr.
 15 Mitmesser stated she reviews studies periodically in her role as Senior Director of
 16 Nutrition and Scientific Affairs. Delgado Decl. Ex. 2, Mitmesser 10/19/16
 17 Deposition Transcript (“Mitmesser Depo. I”) Tr. at 20:3-17. She also testified
 18 later, when asked if she had ever assessed the ginkgo claims prior to the lawsuit,
 19 that yes, she had done so at the time an NTP report challenged the safety of
 20 ginkgo. *See id.* at 191:23-194:14. As evidenced by an internal e-mail from that
 21 time period, that NTP report came out in 2013, before this lawsuit was filed.
 22 Delgado Decl. Ex. 3.

23 Moreover, irrespective of whether Dr. Mitmesser began forming opinions
 24 about the cognitive benefits of ginkgo only after this litigation commenced, or
 25 specifically for this litigation, it is undisputed that all of the ginkgo studies upon
 26 which she relies were “conducted independent of the litigation.” *Daubert v.*
 27 *Merrell Dow Pharm., Inc.* (“*Daubert II*”), 43 F.3d 1311, 1317 (9th Cir. 1995).

28 Accordingly, Dr. Mitmesser is qualified to give her expert opinions on the

1 cognitive benefits of the Product, and challenges regarding her subject matter-
 2 specific qualifications or credibility merely go to the weight of her opinions.

3 **D. Challenges to Dr. Mitmesser’s Methodologies and Conclusions**
 4 **and the Studies Upon Which She Relies Go to the Weight of Her**
 5 **Opinions, Not Their Admissibility.**

6 The balance of Plaintiff’s Motion contains a litany of attacks against Dr.
 7 Mitmesser’s methodology and conclusions, as well as the studies upon which she
 8 relies. In virtually all instances, Plaintiff bases her attacks exclusively upon the
 9 opinions of her retained experts. Each of these attacks is addressed in turn below.
 10 Some of them are utterly baseless, because they rely on mischaracterizations and
 11 misstatements of Dr. Mitmesser’s testimony or the studies she cites.

12 However, before delving into the specifics of each of these objections, it is
 13 important to note that Plaintiff’s arguments largely implicate the weight, not
 14 admissibility, of Dr. Mitmesser’s opinions. It is well-established that “[d]isputes
 15 as to the strength of [an expert’s] credentials, faults in his use of [a particular]
 16 methodology, or lack of textual authority for his opinion, go to the weight, not the
 17 admissibility, of his testimony.” *Kennedy v. Collagen Corp.*, 161 F.3d 1226, 1231
 18 (9th Cir. 1998); *see also Southland Sod Farms v. Stover Seed Co.*, 108 F.3d 1134,
 19 1143 n.8 (9th Cir. 1997) (“a jury should be able to determine whether asserted
 20 technical deficiencies undermine a survey’s probative value”); *Primrose Operating*
 21 *Co. v. National American Ins. Co.*, 382 F.3d 546, 562 (5th Cir. 2004) (questions
 22 relating to bases and sources of expert’s opinion affect weight to be assigned
 23 opinion, not its admissibility). In addition, “whether an expert’s conclusions or
 24 factual assumptions should be accepted are issues that bear on the weight of the
 25 testimony, rather than on its admissibility, and may be attacked by cross
 26 examination and contrary evidence.” *Copelan v. Techtronics Indus.*, 2015 WL
 27 1886510, at *5 (S.D. Cal. Apr. 24, 2015) (*citing, inter alia, Primiano v. Cook*, 598
 28 F.3d 558, 564 (9th Cir. 2010)).

1 Indeed, even in cases where it would be appropriate to proceed with a “battle
 2 of the experts” amongst the parties, the court does not simply exclude one versus
 3 another – or accept the *ipse dixit* opinion of a particular expert; the preferred
 4 course is to permit the jury to resolve the conflict.⁸ As the Ninth Circuit has
 5 explained, the power “to determine the victor in . . . a battle of expert witnesses is
 6 properly reposed in the jury.” *Dorn v. Burlington No. Santa Fe R.R. Co.*, 397 F.3d
 7 1183, 1195-1197 (9th Cir. 2005); *see also McClure Enterprises, Inc. v. Gen. Ins.*
 8 *Co. of Am.*, 2008 WL 2329190, at *3 (D. Ariz. June 4, 2008) (“disagreement
 9 between experts . . . goes to weight, not admissibility. It is left to the parties to
 10 convince the trier of fact that their expert and his methodology are more
 11 appropriate to gauge the loss in this case”). Accordingly, the mere fact that
 12 Plaintiff’s experts disagree with or reject Dr. Mitmesser’s opinion is not a valid
 13 basis for excluding Dr. Mitmesser.

14 **1. *The Snitz and Dekoksy studies cited by Plaintiff are properly***
 15 ***distinguishable.***

16 Plaintiff decries the fact that Dr. Mitmesser’s expert report does not discuss
 17 two of Plaintiff’s central studies – Snitz and Dekoksy. These two studies
 18 purportedly suggest that the Product is not effective as advertised. Mot. at 18.

19 However, this objection misses the mark. As discussed above, in a falsity
 20 case such as this one, it is entirely Plaintiff’s burden to prove that the Product’s
 21 claims are actually false; Defendants have no burden to prove anything or to
 22 substantiate their claims. Moreover, Plaintiff may not be able to carry her burden
 23 if there exists opposing scientific evidence regarding the Product’s efficacy. *See*
 24 _____

25 ⁸ Of course, Defendants cannot emphasize enough that this is **not** the type of case
 26 where the Court should proceed with jury trial focusing on a “battle of the
 27 experts.” As Defendants explained in their Motion for Summary Judgment,
 28 where “battle of the experts” exists in a falsity case, Plaintiff loses on summary
 judgment.

1 Sec. II. A.1, *supra*. Accordingly, Defendants have no obligation to include any of
 2 the studies which support Plaintiff's contentions. Rather, it is entirely appropriate
 3 for Dr. Mitmesser to refer exclusively to studies supportive of the Product's claims
 4 as a counter-point to Plaintiff's proffered scientific evidence.

5 In addition, as a matter of law, experts are entitled to omit or reject opposing
 6 scientific evidence on principled grounds. *See, e.g., Barber v. United Airlines,*
 7 *Inc.*, 2001 WL 950885, at *2 (7th Cir. Aug. 16, 2001) (omission of contrary data
 8 requires adequate explanation). Here, the governing legal standard justifies Dr.
 9 Mitmesser's omission of the Snitz and Dekoksy studies: it is Plaintiff's burden to
 10 show falsity (i.e., that there is no disagreement among scientists), and Dr.
 11 Mitmesser is submitting opposing evidence for the trier of fact to decide if Plaintiff
 12 has met her burden of proof. *See* Delgado Decl. Ex. 1, Mitmesser Depo. II Tr.
 13 60:11-12 ("the report was written to support the claims on our labels").

14 There are also principled scientific justifications for Dr. Mitmesser's
 15 omission of the Snitz and Dekoksy studies. Specifically as to the Snitz study, Dr.
 16 Mitmesser has explained that it "had significant missing data points." *Id.*,
 17 Mitmesser Depo. II Tr. 66:2-19. As to both the Snitz and Kekoksy studies, she
 18 was troubled that they utilized an "intent-to-treat [ITT] population," which is
 19 susceptible to yielding unreliable false negatives because many of the subjects
 20 failed to actually take the assigned dosage of ginkgo for the duration of the test. *Id.*
 21 Indeed, even Plaintiff's biostatistician has conceded that ITT studies are
 22 "conservative" insofar as they show greater susceptibility to Type II errors (i.e., a
 23 false negative where the researcher fails to find a treatment effective even though it
 24 is). Deposition Transcript of Martin Lee at 70:7-13; 82:11-18; 83:25-84:15 (Dkt.
 25 No. 172-52).

26 While Plaintiff is free to dispute Dr. Mitmesser's methodological critiques,
 27 these disputes ultimately go to the weight and not the admissibility of her opinions.
 28 *See, e.g., Kennedy*, 161 F.3d at 1231 ("[d]isputes as to the strength of [an expert's]

1 credentials, faults in his use of [a particular] methodology, or lack of textual
 2 authority for his opinion, go to the weight, not the admissibility, of his testimony”).
 3 Accordingly, Dr. Mitmesser’s opinions should not be excluded.⁹

4 **2. *Dr. Mitmesser’s conclusions are consistent with the studies’***
 5 *findings and their authors’ objectives.*

6 Plaintiff accuses Dr. Mitmesser of misstating the conclusions of five of the
 7 studies she relies upon – the studies conducted by Gebner, Rai, Wesnes,¹⁰ Vorberg
 8 and Fies. Mot. at 7-9. However, upon a closer – and honest – inspection of these
 9 studies and Dr. Mitmesser’s statements, it is evident that her conclusions are
 10 consistent with their authors’ findings and objectives.

11
 12
 13 ⁹ Plaintiff also criticizes Dr. Mitmesser for not including a “meta-analysis” study
 14 conducted by Laws, which Plaintiff claims shows that the Product is not
 15 effective. Mot. at 9. A meta-analysis is generally a review or compilation of a
 16 body of multiple studies on a subject matter. Plaintiff tries to discredit Dr.
 17 Mitmesser for allegedly testifying at deposition that meta-analyses are a
 18 “misuse” of scientific evidence. *Id.* However, this testimony is taken out of
 19 context and incomplete. What Dr. Mitmesser actually stated was that she
 20 would not rely “solely” on a meta-analysis. Delgado Decl. Ex. 2, Mitmesser
 21 Depo. I Tr. at 235:20-23. Further, as to the Laws meta-analysis that Plaintiff
 22 proffered, Dr. Mitmesser explained she would not rely on it because it
 23 evaluated ginkgo as “an *enhancer* of cognitive function,” which is not marketed
 24 on the Product’s label and is therefore not a relevant testing objective. *Id.*,
 25 235:4-19 (“so that’s not necessarily something that we’re going after, is to
 26 enhance”) (emphasis added).

27 ¹⁰ With respect to the Gebner, Rai and Wesnes studies, Plaintiff insinuates that
 28 they are somehow less reliable than opposing studies cited by Plaintiff’s experts
 because the latter are “more recent” in vintage. Mot. at 9. However, the law is
 clear there is no principled reason to discredit, much less reject, an older study
 in favor of a more recent one simply because of their age difference. *See, e.g.,*
Sonner v. Schwabe N. Am., Inc., 2017 WL 474106, at *6 (C.D. Cal. Feb. 2,
 2017) (“no support for the assertion that experts must always rely upon the most
 recent studies to reach a conclusion”).

1 Gebner Study: Dr. Mitmesser’s report describes this study as follows: “This
 2 study provides evidence for the fact that Gingko can help support healthy brain
 3 function.” Mitmesser Expert Report, at Sec. III.B.1.e. (Dkt. No. 185-2). This
 4 description *tracks the conclusion* written by the study’s authors, which states, in
 5 part: “The results show that chronic G.B.E. medication has a positive effect in
 6 geriatric subjects with deterioration of mental performance and vigilance . . .”
 7 Gebner Study at 1460 (Dkt. No. 181-2). Plaintiff takes issue with the fact that
 8 these results are the secondary findings of the study. Mot. at 7-8. That is a
 9 distinction without a difference. Moreover, even if Plaintiff’s argument is credited,
 10 the question of whether Dr. Mitmesser’s conclusion is properly supported by
 11 Gebner’s study goes to the weight, and not the admissibility, of Dr. Mitmesser’s
 12 opinion. *See, e.g., Hartley v. Dillard's, Inc.*, 310 F.3d 1054, 1061 (8th Cir. 2002)
 13 (“the factual basis of an expert opinion goes to the credibility of the testimony, not
 14 the admissibility, and it is up to the opposing party to examine the factual basis for
 15 the opinion in cross-examination”).

16 Rai Study: Dr. Mitmesser’s report describes this study as follows: “This
 17 study provides evidence for the fact that Gingko can help support memory.”
 18 Mitmesser Expert Report, at Sec. III.B.1.j (Dkt. No. 185-2). Plaintiff objects to
 19 this description because the Rai study in fact yielded “contrasting results regarding
 20 the efficacy of GB” – i.e., some results supported the Product’s claims while others
 21 did not – but Dr. Mitmesser did not mention the negative results in her report.
 22 Mot. at 8. However, as discussed earlier, given that the governing legal standard
 23 imposes the burden of proof entirely upon Plaintiff to establish falsity, Dr.
 24 Mitmesser is under no obligation to proffer negative findings, and she may
 25 appropriately highlight counter-evidence which support the Product’s claims. In
 26 any event, this issue ultimately goes to the weight of Dr. Mitmesser’s opinions, and
 27 Plaintiff is free to test her credibility on cross-examination. *See, e.g., Hartley.*, 310
 28 F.3d at 1061 (“the factual basis of an expert opinion goes to the credibility of the

1 testimony, not the admissibility, and it is up to the opposing party to examine the
2 factual basis for the opinion in cross-examination”).

3 Wesnes Study: Plaintiff challenges Dr. Mitmesser’s reliance on this study
4 because it utilizes a certain statistical technique called the “one-tailed t-test.”
5 Plaintiff’s experts apparently believe that this technique is unreliable. Mot. at 8-9.
6 However, regardless of the merits of this dispute, it is a methodological dispute,
7 which ultimately goes to the weight but not admissibility of Dr. Mitmesser’s
8 opinion. *See Kennedy*, 161 F.3d at 1231 (methodology questions go to weight, not
9 admissibility).

10 Vorberg Study: Dr. Mitmesser’s report describes this study as follows:
11 “This study provides evidence of increased blood flow to the brain which helped
12 ameliorate the various symptoms that had resulted from insufficient blood flow to
13 the brain.” Mitmesser Expert Report, at Sec. III.B.1.a. (Dkt. No. 185-2). Plaintiff
14 alleges that this is an inaccurate conclusion because Vorberg’s findings supposedly
15 never mention blood flow to the brain. Mot. at 10. Plaintiff is wrong. Vorberg’s
16 study notes that the “objective of the study was to test the effects of GBE therapy
17 on symptoms of cerebral insufficiency.”¹¹ Vorberg Study at 149 (Dkt. No. 172-4).
18 With respect to its findings, the study states that the “good therapeutic results”
19 observed in testing “may possibly be explained by an improvement in global and
20 regional *blood-flow in the brain*....” *Id.* at 156 (emphasis supplied). Vorberg
21 provides no other explanation as to what could be responsible for the positive
22 results found. *Id.* Accordingly, Dr. Mitmesser’s conclusion is consistent with the
23 authors’ analysis. In any event, Plaintiff’s objection to Dr. Mitmesser’s
24 _____

25 ¹¹ Cerebral insufficiency or cerebrovascular insufficiency “refers to a number of
26 rare conditions that result in obstruction of one or more of the arteries that
27 supply blood to the brain.”
28 http://www.hopkinsmedicine.org/neurology_neurosurgery/centers_clinics/cerebrovascular/conditions/cerebrovascular_insufficiency.html.

1 conclusions about the Vorberg study ultimately goes to weight, not admissibility.
 2 *See Copelan v. Techtronics Indus.*, 2015 WL 1886510, at *5 (“whether an expert's
 3 conclusions or factual assumptions should be accepted are issues that bear on the
 4 weight of the testimony, rather than on its admissibility, and may be attacked by
 5 cross examination and contrary evidence”).

6 Fies Study: Dr. Mitmesser’s report describes this study as follows: “This
 7 study provides evidence for increased blood flow to the eyes which would also be
 8 indicative of increased blood flow to the brain.” Mitmesser Expert Report, at Sec.
 9 III.B.1.c. (Dkt. No. 185-2). Plaintiff alleges that Dr. Mitmesser misstates Fies’
 10 findings because the study supposedly never mentions blood flow to the eyes.
 11 Mot. at 10. Plaintiff is mistaken. The study found there was meaningful
 12 improvement in the vision of the subjects to whom ginkgo was administered. In
 13 explaining this result, the authors of the study referenced the “proven therapeutic
 14 effects” of ginkgo in patients who have poor blood circulation to the brain, as well
 15 as pharmacological studies which show that ginkgo influences the “circulation
 16 capacity of blood.” Fies Study at 7 (Dkt. No. 172-6). Accordingly, there is an
 17 existent “supposition” that ginkgo is “expected to have” beneficial effects on
 18 disorders of the retina, given the “close histopathological correlation between
 19 cerebral and retinal vascular supply” – a supposition that has been “repeatedly
 20 substantiated” by previous studies conducted on subjects with various retinal
 21 disorders. *Id.* The authors went on to conclude that the results of their study – i.e.,
 22 improved vision exhibited by those administered various dosages of ginkgo –
 23 “confirms previous clinical empirical results.” *Id.* at 8. In any event, Plaintiff’s
 24 objection to Dr. Mitmesser’s conclusions about the Fies study ultimately goes to
 25 weight, not admissibility. *See Copelan*, 2015 WL 1886510, at *5 (“whether an
 26 expert’s conclusions or factual assumptions should be accepted are issues that bear
 27 on the weight of the testimony, rather than on its admissibility, and may be
 28 attacked by cross examination and contrary evidence”).

1 **3. *Plaintiff mischaracterizes Dr. Mitmesser’s opinion regarding***
 2 ***studies conducted upon diseased subjects.***

3 Dr. Mitmesser relies upon multiple studies conducted upon diseased subjects
 4 (e.g., individuals suffering from Alzheimer’s or dementia) which support the
 5 Product’s claims regarding cognitive benefits. Plaintiff attacks these studies on the
 6 grounds that their results cannot be extrapolated to the healthy population.
 7 However, as discussed earlier, this objection is unavailing because Plaintiff has the
 8 burden of proving that the Product’s claims are false as to “all consumers” – both
 9 the healthy and the sick. Therefore, if Plaintiff is unable to establish falsity even
 10 just as to the diseased population, her entire lawsuit fails.

11 But beyond that, Plaintiff’s critique is also disingenuous. She claims Dr.
 12 Mitmesser has admitted that the results of studies conducted upon diseased
 13 subjects have no bearing on the healthy population. She cites as proof a passage in
 14 Dr. Mitmesser’s deposition in which she responded to a hypothetical question and
 15 agreed that studies purporting to show ginkgo’s efficacy “*in the treatment of*”
 16 Alzheimer’s or dementia cannot be relied upon to reach conclusions about its
 17 effects on the healthy population. Mot. at 12, *citing* Mitmesser Depo. II Tr. at
 18 102:10-21 (emphasis supplied). However, Plaintiff is using this quote out of
 19 context to give a misleading impression. Prior to that passage in her deposition,
 20 Dr. Mitmesser made clear that the Product was never intended or marketed to
 21 “*treat*” any disease, including Alzheimer’s and dementia. Delgado Decl. Ex. 1,
 22 Mitmesser Depo. II Tr. at 48:17-23 (emphasis added). As such, it is unsurprising
 23 that Dr. Mitmesser would decline to rely on any study that purports to support the
 24 use of the Product as a “treatment” for disease.

25 What Dr. Mitmesser also said is that, as distinguished from the treatment of
 26 disease, there is reliable evidence of ginkgo’s ability to “support the improvement
 27 of the *symptoms*” of diseases such as dementia or Alzheimer’s, which have
 28 symptoms that include diminished memory, recognition, and recall. *Id.* at 42:18-

22 (emphasis added). And, she further explained, ginkgo’s demonstrated capacity to help ameliorate the cognitive symptoms of those with a “stressed system” – i.e., suffering from diseases like Alzheimer’s or dementia – can assist in our understanding of how the substance may react in, and provided benefits to, a healthy person. *Id.* at 49:5-50:3.¹² Accordingly, Dr. Mitmesser has not contradicted herself in regards to the relevance of the studies conducted upon the diseased population.

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¹² Plaintiff also levels the accusation that Dr. Mitmesser disagrees with certain recommendations of the Alzheimer’s Association (“AA”) regarding ginkgo. Motion at 12-13. This is misleading. At her deposition, Plaintiff’s counsel asked her a vague question about whether she would agree with the AA’s purported recommendation that ginkgo should not be taken “for Alzheimer’s,” to which Dr. Mitmesser replied that she would disagree. Delgado Decl. Ex. 1, Mitmesser Depo. II Tr. at 107:21-25. Within the context of the questioning, Dr. Mitmesser understood the phrase “for Alzheimer’s” to mean using ginkgo “in the treatment of some *symptoms* of Alzheimer’s,” and as such, her response is consistent with the scientific data she has reviewed. *Id.* at 107:7-20 (emphasis supplied). Moreover, there is no real disagreement between her and the AA. The text of AA’s actual policy statement on this issue – a copy of which counsel refused to show Dr. Mitmesser at her deposition, even though she indicated she was not familiar with it – reveals Plaintiff’s counsel misrepresented its contents.

Specifically, the AA’s statement recommends against the use of ginkgo as an alternate “treatment[]” for Alzheimer’s, but it recognizes that it “may have positive effects on cells within the brain and body,” and it further acknowledges that ginkgo is “being used in Europe to alleviate cognitive symptoms associated with a number of neurological conditions.” Alzheimer’s Association, *Alternative Treatments*, http://www.alz.org/alzheimers_disease_alternative_treatments.asp (Dkt. No. 179-15).

Had Plaintiff’s counsel shown Dr. Mitmesser a copy of the AA’s actual recommendation at her deposition, she would have assuredly agreed with it.

1 **III. CONCLUSION**

2 For all of the foregoing reasons, Plaintiff's Motion should be denied in its
3 entirety.

4
5 Dated: May 23, 2017

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